DECLARATIO	ON AND	Attorney Docket Number	21252Y								
POWER OF AT FOR UTILITY OF		First Named Inventor	Christopher S. Burgey, et al.								
PATENT APPL		Co	OMPLETE IF KNOWN								
(37 CFR 1.		Application Number									
Declaration Submitted	Declaration Submitted after Initial	Filing Date									
with Initial OR Filing	Filing (surcharge (37 CFR 1.16 (e)) required)	Group Art Unit									
	required)	Examiner Name		J							
As a below named inventor	, I hereby declare that	t:									
My residence, post office address, and citizenship are as stated below next to my name.											
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:											
CGRP RECEPTOR ANTAGONIST											
the specification of which		(Title of the Invention)	·								
·	kat Number and Title o	f the Invention noted shows									
bears the Attorney Docket Number and Title of the Invention noted above											
OR is attached hereto OR											
was filed on (MM/DD/	YYYY)	as United States Ap	pplication Number or PCT Inte	ernational							
Application Number and was amended on (MM/DD/YYYY) (if applicable).											
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as											
amended by any amendment specifically referred to above.											
I acknowledge the duty to disclose to the Patent and Trademark Office all information known to me to be material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.											
	I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f) or 365(b) of any foreign application(s) for patent or inventor's										
certificate(s), or 365(a) of any	PCT international app	lication which designated at le	ast one country other than the	United States of							
		y, by checking the box, any forcing date before that of the applic	•	* * * *							
Prior Foreign Application		Foreign Filing Dat		Priority Claimed?							
Number(s)	Country	(MM/DD/YYYY)	Attorney Docket Nun	nber YES NO							
_											
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.											
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.											
Application Num	aber(s)	Filing Date (MM/DD/YYYY)	Attorney Docket Number								
60/464,109	04	4/15/2003	21252PV								

DECLARATION AND POWER OF ATTORNEY for Utility or Design Patent Application

designating t is not disclos 35 U.S.C. 11	the United sed in the place in	States of A prior Unite wledge the came avai	America, ed States of ed duty to	listed or PC disclo	below Tinter ose info	and, insonational ormation	ofar a applic know	s the s cation on to m	ubjectin the	ct matter o e manner be materi:	of each providal to pa	of the ed by t tentabi	claims on he first lity as o	rnational application of this application paragraph of defined in international filing	
U.S. Parent Application or PCT Parent							Parent Filing Date (MM/DD/YYYY)				Parent Patent Number (if applicable)				
Application Number							(MADAGO I I I I I)								
					•										
Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.															
As a named inventor, I hereby appoint, respectively and individually, as my attorney(s) or agent(s) with full power of substitution and revocation, the following registered practitioner(s) to prosecute this application and to transact all business in the United States Patent and Trademark Office connected therewith: Customer Number OR Registered practitioner(s) name/registration number listed below															
	Name			Registration Number				Nan						Registration Number	
David Rubin				40,31		ioei								Number	
٠															
Direct all co	rresponden	ice to: X	Custon	ner N	umber	00	021	0							
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Country	USA	USA Telephone (73					(732):	2)594-2675			Fax		(732):	594-4720	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.															
Name of Sole or First Inventor: A petition has been filed for this unsigned inventor															
Given Name (first and middle [if any]) Family Name or Surname									name						
Christopher S. Burgey Inventor's 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0															
Signature	Chul S. Buyy							_	Date 7 Apr. 2004			pr, 2004			
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City	Rahway							State NJ ZIP 07065-0907				065-0907			
Additional inventors are being named on the 1 supplemental Additional Inventors(s) sheet(s) PTO/SB/02A attached hereto.															

DECLARATION AND POWER OF ATTORNEY

ADDITIONAL INVENTOR(S) Supplemental Sheet

-													
Name of Additional Joint Inventor, if any:					A petition has been filed for this unsigned inventor						d inventor		
Given Name (first and middle [if an							ne						
Daniel V.								Paone Family Name or Surname					
Inventor's Signature		Tamis	12	2. Pro			~e			フィ	Apr. 2004		
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Name of Addition	al Jo	oint Inventor, if any:		A petition has been filed for this unsigned inventor									
Give	n Na	me (first and middle [if	any])					F	Family Name or Surname				
Anthony W.					S	haw			_,				
Inventor's Signature	l	huther w Al	hac	~						07 APR, 2004			
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Name of Additional Joint Inventor, if any:				A petition has been filed for this unsigned inventor									
Given Name (first and middle [if			any])		_	Family Name or Surname							
Theresa M.				Williams									
Inventor's Signature	7	heusa M. U	rel	llians					Date	apr. 7	,2004		
Residence: City	Harl	leysville	State	PA		Country US				Citizenship US			
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